

TheMANY FACES OF AGING



Facts & Figures:

In the year 2000, people age 60 or older in the U.S. accounted for over 16 percent of the population.

Today, one in every ten persons is a woman at least 60 years in age. One of every six women is in a minority group: Black, Hispanic, Native American or Asian American/Pacific Islander.

Eighty-three percent of centenarians are women. The number of women age 100 or older will double in the next 10 years.

Meeting the Needs of Older Women: A Diverse and Growing Population

People are living longer, and most older Americans are women. Because women are living longer than men, the health, economic and social challenges of the elder population are more often the challenges of *women*. The U.S. Administration on Aging (AoA) encourages planners and policy makers to include the many, varied issues surrounding older women as we prepare to address the diverse needs of an aging society.

Older Women are our Future: Trends and Projections.

There are more older women than older men in the United States, and the proportion of the population that is female increases with age. In 2001, women accounted for approximately 58 percent of the population age 60 and older and 70 percent of the population age 85 and older – currently the fastest growing segment of the older population. Today, the average life expectancy at birth is 79 years for women and 72 years for men. Since women have a longer average life expectancy than men and also tend to marry men older than themselves, 7 out of 10 “baby boom” women will outlive their husbands – many can expect to be widows for 15 to 20 years. One in every ten persons is a woman, who is at least 60 years old, and one of every six older women is in a minority group.

Why Older Women’s Issues are Important.

Older women are a growing population, and the challenges of aging are often more pronounced among older women. Some of those challenges include economic security, access to community services, and health and long-term care. Compared with men, older women are three times more likely to be living alone, spend more years and a larger percentage of their lifetime disabled, are nearly twice as likely to reside in a nursing home, and are more than twice as likely to live in poverty.

Economic Security.

Almost three-quarters of all older persons with incomes below the poverty level are women. More than half of elderly widows now living in poverty were not poor before the death of their husbands. Poverty increases with age and is especially prevalent among older women of color and older women who live alone. Most older women today will live out their lives as widows dependent on Social Security benefits as their primary source of income, and older women are only about half as likely as older men to be receiving pension income. Those who do receive pensions and retirement benefits, often receive less than men because women traditionally earn less money than men and many take time out from work to bear and raise children. Social Security benefits are often insufficient leaving women at greater risk of impoverishment throughout their older years. The older they live, the higher is their risk.



Keeping Women Healthy: Prevention is Key.

Prevention, screening and early testing are critical to women's health care. Yet 2/3 of older women still are not taking advantage of mammograms and other preventive services for reasons such as cost, belief that such services are not needed or lack of referral by their physician.

Women are primary caregivers for spouses, family, friends, and grandchildren.

*Home, community and faith-based services, which include personal care services, assistance with household tasks, transportation, and attention to health needs are **critical** to the well being of older women.*

Services targeted to older women should be designed to grow and be flexible enough to meet the needs of older women in diverse circumstances.

Three out of four persons over age 65 on Supplemental Security Income are women.

Statistics for older women of many minority groups indicate that among older women living alone, three out of five blacks and two out of five Latinas live in poverty.

Health and Long-Term Care.

The current health care system ties access to affordable health insurance to employment and marital status, often placing women at a disadvantage. Mid-life women are more likely to be unemployed or to work part time in industries that do not offer benefits. If they are dependent upon a spouse's plan, they are vulnerable to losing coverage due to separation, divorce, or their spouse's retirement, unemployment or death. Many older women have coverage through Medicare, but their lower incomes mean they spend more on out-of-pocket health care expenses. They are less likely than men to afford nursing homes, home care or private long-term care insurance. Still, older women are at much higher risk of chronic diseases and disabling conditions. And older minority women who do not speak English face serious challenges in accessing health care.

Living Arrangements.

Of the more than 9 million older persons living alone, 80 percent are women. By the year 2020, older women will account for 85 percent of persons age 65 and older who live alone. Older women are at great risk of becoming isolated if they do not have access to community or other supportive services and if they develop chronic ailments or become disabled or frail. They are more likely to be fearful of crime and restrict their activities outside their homes, cutting themselves off from needed assistance. Older women living alone in rural areas are faced with other unique challenges.

Meeting the Challenges: The Older Americans Act and The National Family Caregiver Support Program.

Women are more often caregivers for aging relatives and children, and are often the primary caregiver for their spouse who may be ill or have disabilities. For almost 1.3 million children, a grandparent – most often the grandmother – is the primary caregiver. In recognition of the invaluable role of caregivers, the Older Americans Act (OAA), as amended in 2000, established an important new program, the National Family Caregiver Support Program (NFCSP), developed by the AoA based on several successful state models.

The program calls for all states, working in partnership with area agencies on aging and local community-service providers to put into place multi-faceted systems of support services for family caregivers, including: Information about resources that will help family caregivers; assistance to families in locating services from private and voluntary agencies; caregiver training; peer support and counseling to help

*“We will take a leadership role in this country and around the world in improving women’s health.”— Secretary of the U.S. Department of Health and Human Services
Tommy G. Thompson,
2/2/01*

agencies; caregiver training, peer support and counseling to help families cope with the emotional and physical stress of dealing with a family member’s chronic condition; respite care provided in a home, an adult day-care center or over a weekend in a nursing home or an assisted living facility; and supplemental services, on a limited basis, to complement the care provided by caregivers.

The NFCSP recognizes the needs of grandparents (most commonly grandmothers), who are sole caregivers of grandchildren and the special needs of Native American caregivers.

Nutrition and Other Supportive Services.

An important component of the OAA includes programs and services to specifically address nutrition among older persons – a great concern surrounding the health of older women. Activities include, for example, providing meals to seniors in congregate settings to improve nutrition status and home-delivered meals for persons age 60 and older who are homebound due to illness, disability, or geographic isolation. Some other components of the OAA provide support services such as transportation, health promotion, nursing home and ombudsmen services, and elder abuse prevention efforts.

Who to Contact for Help.

Almost every state has one or more Area Agency on Aging (AAA) that serve local communities, older residents, and their families. (In a few states, the State Unit or Office on Aging serves as the AAA.) Local AAA’s are generally listed in the city or county government sections of the telephone directory under “Aging” or “Social Services.”

The Eldercare Locator.

AoA supports a nationwide, toll-free information and assistance directory called the Eldercare Locator, which can locate the appropriate AAA to help an individual needing assistance. That number is 1-800-677-1116 and is staffed Monday through Friday 9 a.m. to 8 p.m. Eastern Time.

Working in close partnership with its sister agencies in the U.S. Department of Health and Human Services, the AoA is the official Federal agency dedicated to policy development, planning and the delivery of supportive home and community-based services to older persons and their caregivers. The AoA works through the national aging network of 56 State Units on Aging, 655 Area Agencies on Aging, 233 Tribal and Native organizations representing 300 American Indian and Alaska Native Tribal organizations, and two organizations serving Native Hawaiians, plus thousands of service providers, adult care centers, caregivers, and volunteers. For more information about the AoA, please contact:

**U.S. Administration on Aging
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201**

**Phone: (202) 619-0724
Fax: (202) 260-1012
Email: aoainfo@aoa.gov
Web: www.aoa.gov**